

MONTANA STATE HOSPITAL POLICY AND PROCEDURE

MEDICAL RECORDS ACCESS AND SECURITY

Effective Date: September 1, 2002 Policy #: HI-07

Page 1 of 3

- **I. PURPOSE:** To insure that all medical information necessary to assist in patient care will be provided to the appropriate health care professional and to safeguard records or medical information against unauthorized access.
- II. POLICY: To ensure confidentiality and security, access to patient medical records at MSH is limited to authorized staff. Authorized staff includes all clinical staff (medical, psychiatric, psychology, social work, rehabilitation, nursing and Dietitian) and clinical consultants. Students, interns, and researchers may have access to medical records after obtaining permission from appropriate clinical service director.
- III. **DEFINITIONS:** None

IV. RESPONSIBILITIES:

A. Health Information:

- 1. Maintain patient records in accordance with accepted professional standards and practices.
- 2. Track records signed out and returned to the Health Information Department.
- 3. Lock area when unattended.
- 4. Maintain emergency access to the Health Information Department after hours.

B. Clinical staff:

- 1. Accept responsibility to protect the confidentiality of the medical record.
- 2. Assumes responsibility for returning records in good condition and at the designated time.
- 3. Do not lock charts in their office overnight.

V. PROCEDURE:

- A. Access to Health Information Department
 - 1. Health Information Department will be locked whenever it is unattended. The Health Information Department is open from 8:00 AM to 6:00 PM Monday through Friday.

MEDICAL RECORDS: ACCESS & SECURITY

Page 2 of 3

- 2. Health Information Staff including Front Desk Hospital Operation Specialists and Staffing Office (House Supervisor's Keys) and the Maintenance supervisor, have keys to the Health Information Department.
- 3. Hospital Operations Specialists have access to the Health Information Department on weekends to perform various Health Information duties.
- B. Emergency Access to the Health Information Department
 - 1. The House Nursing Supervisor and Hospital Operation Specialists may access the patient record area for the purpose of retrieving a medical record for authorized staff particularly for an after hours admission.
 - 2. Other staff will not enter the Health Information Department
- C. Access to records in the Health Information Department.
 - 1. Patient records will be routed to the Health Information Department within 72 hours following discharge.
 - 2. Patient records will not be removed from the hospital unless by court order, subpoena or statute.
 - 3. All charts removed from the area must be logged out.
 - 4. Authorized staff may be limited to viewing records in the Health Information department should they consistently demonstrate a lack of responsibility for returning records within the designated timeframe.
- D. Electronic Record Security.
 - 1. Staff are assigned a client user number upon completion of reviewing and signing confidentiality statement.
 - 2. Staff are assigned data access rights according to needs of their position.
 - 3. Data access rights are discontinued upon termination of employment.
- **VI. REFERENCES:** JCAHO: IM 2, M.C.A 53-21-166
- VII. COLLABORATED WITH: None
- VIII. RESCISSIONS: #HI-07, Medical Records Access and Security dated February 14, 2000; HOPP # HI-06-96-R, Medical Records, Access and Security, dated November 15, 1996.
- **IX. DISTRIBUTION:** All hospital policy manuals
- X. REVIEW AND REISSUE DATE: September 2005

Montana State Hospital Policy and Procedure

MEDICAL RECORDS: ACCESS & SECURITY				Page 3 of 3
XI.	FOLLOW-UP RESPONSIBILITY: Director of Information Resources			
XII.	ATTACHMENTS: None			
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Ed Amberg Hospital Administrator		Date	Billie Holmlund, RHIA Director of Information Res	Date ources